DATENT ANNI LO COLO DE LA COLO DEL COLO DE LA COLO DEL LA COLO DE LA COLO DEL LA COLO DEL LA COLO DEL LA COLO DEL LA COLO DELA COLO DELA COLO DEL LA COLO DELA COLO DELA COLO DELA COLO DELA COLO DELA								Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000								09970458				
CLAIMS AS FILED - PART I								SMALL	ENTITY	7 7	OTHE	RTHAN
Ę	OTAL CLAIMS		(Colum	n 1)	(Coli	(Column 2)			TYPE		OR SMALL ENTIT	
TOTAL CLAIMS			10					RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUM	NUMBER EXTRA		BASIC F	EE 355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			/0 minus 20=		. 8			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS				inus 3 =	·	r		X40=		OR	X80=	
Μl	JLTIPLE DEPE	NDENT CLAIM P	RESENT					.105		1		
* If the difference in column 1 is less than zero, enter "0" in column 2							l	+135=		OR	L	
CLAIMS AS AMENDED - PART II								TOTAL	· <u> </u>	JOR		L
(Column 1) (Column 2) (Column 3)								SMALI	L ENTITY	OR	OTHER SMALL	
4		CLAIMS HIGHES REMAINING NUMBE		EST				ADDI-	7		ADDI-	
AMENDMENT A		AFTER AMENDMENT		PREVIO	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	. 16	Minus	2	0			X\$ 9=	1	OR	X\$18=	155
	Independent	· /	Minus	2	3	=	ᅥ	X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ŀ		-	100		
							L	+135=		OR	+270=	,
							A	TOTA DDIT. FEI		OR	TOTAL ADDIT. FEE	
		(Column 1) CLAIMS	•	(Colun		(Column 3)	_			· ·	·	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
	Total	•	Minus	**		=	r	X\$ 9=	1 1 1 1	1_1	X\$18=	FEE
	Independent	•	Minus	***		=	╽┠		 	OR		
	FIRST PRESENTATION OF MU		ILTIPLE DEPENDENT		CLAIM		X40=		ļ	OR	X80=	
							L	+135=		OR	+270=	
								TOTAL DDIT, FEE		OR ,	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)											,	
AMENDMENT C		CLAIMS REMAINING		HIGHE		PRESENT	Г		ADDI-	1 1		ADDI-
	, ;	AFTER AMENDMENT		PREVIO	-	EXTRA		RATE	TIONAL FEE		RATE	TIONAL
	Total		Minus	••		=	r	X\$ 9=	rec_	OR	X\$18=	FEE
	ind p nd nt	•	Minus	***		= .	┢			i		
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM		1	X40=	 	OR	X80=	
+135= OR +270=												
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE												
7	r the "Highest Nur The "Highest Num	nber Previously Paid ber Previously Paid	id For (NTH); For (Total r	S SPACE is Independer	less than nl) is the	n 3, enter "3." highest number			propriate box			